

**Town of Barrington**  
**Payroll Direct Deposit**  
**Authorization Form**

I, \_\_\_\_\_ hereby authorize

\_\_\_\_\_ Town of Barrington to direct deposit my net payroll wages into the account specified on the voided check furnished to the payroll clerk. Direct Deposit will become effective 2 pay periods from date this form is received.

\_\_\_\_\_ Town of Barrington to stop direct deposit on my payroll check as of \_\_\_\_\_.

\_\_\_\_\_ New enrollment

\_\_\_\_\_ Change in Banking Info

**AN ACTUAL VOIDED CHECK MUST BE ATTACHED**  
**SAVINGS ACCOUNT INFORMATION MUST BE OBTAINED IN**  
**WRITING FROM YOUR FINANCIAL INSTITUTION**

Employee Signature : \_\_\_\_\_ Date: \_\_\_\_\_